

FEC FORM 2  
STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

16 NOV 29 PM 3:33

1. (a) Name of Candidate (in full) Dr. Marcia Karen Abrams, MDiv, DD, PhD		
(b) Address (number and street) 204 Helen Street		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Fayetteville, North Carolina 28303		2. FEC Candidate Identification Number C00624239
4. Party Affiliation Republican		5. Office Sought Senate
6. State & District of Candidate North Carolina		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) DR. MARCIA KAREN ABRAMS FOR UNITED STATES SENATE	
(b) Address (number and street) 204 Helen Street	
(c) City, State, and ZIP Code Fayetteville, North Carolina 28303	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES  
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) DR. MARCIA KAREN ABRAMS FOR UNITED STATES SENATE	
(b) Address (number and street) 204 Helen Street	
(c) City, State, and ZIP Code Fayetteville, North Carolina 28303	

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Dr. Marcia Karen Abrams, MDiv, DD, PhD	Date 10/28/2016
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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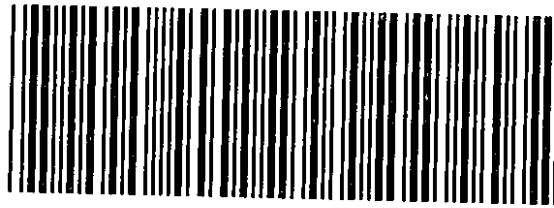
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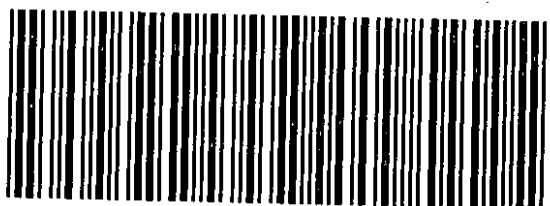
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